

A Box SEA

Docket No.
P07 41795

UTILITY PATENT APPLICATION TRANSMITTAL (Small Entity)

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Total Pages in this Submission
90

TO THE ASSISTANT COMMISSIONER FOR PATENTS

**Box Patent Application
Washington, D.C. 20231**

Transmitted herewith for filing under 35 U.S.C. 111(a) and 37 C.F.R. 1.53(b) is a new utility patent application for an invention entitled:

**TRANSFECTION, STORAGE AND TRANSFER OF MALE GERM CELLS FOR GENERATION
OF SELECTABLE TRANSGENIC STEM CELLS**

and invented by:

Carol W. Readhead, Robert Winston, H. Phillip Koeffler, and Carsten Muller

If a CONTINUATION APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No.: 09/191,920

Which is a:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 60/065,825

Which is a:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Enclosed are:

Application Elements

1. ☒ Filing fee as calculated and transmitted as described below
2. ☒ Specification having 75 pages and including the following:
 - a. ☒ Descriptive Title of the Invention
 - b. ☒ Cross References to Related Applications (if applicable)
 - c. ☐ Statement Regarding Federally-sponsored Research/Development (if applicable)
 - d. ☐ Reference to Microfiche Appendix (if applicable)
 - e. ☒ Background of the Invention
 - f. ☒ Brief Summary of the Invention
 - g. ☒ Brief Description of the Drawings (if drawings filed)
 - h. ☒ Detailed Description
 - i. ☒ Claim(s) as Classified Below
 - j. ☒ Abstract of the Disclosure

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Application Elements (Continued)

3. ☒ Drawing(s) (when necessary as prescribed by 35 USC 113)
- a. ☐ Formal b. ☒ Informal Number of Sheets 7
4. ☒ Oath or Declaration
- a. ☐ Newly executed (original or copy) ☒ Unexecuted
- b. ☐ Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional application only)
- c. ☐ With Power of Attorney ☐ Without Power of Attorney
- d. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application,
see 37 C.F.R. 1.63(d)(2) and 1.33(b).
5. ☐ Incorporation By Reference (usable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied
under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby
incorporated by reference therein.
6. ☐ Computer Program in Microfiche
7. ☒ Genetic Sequence Submission (if applicable, all must be included)
- a. ☒ Paper Copy
- b. ☒ Computer Readable Copy
- c. ☒ Statement Verifying Identical Paper and Computer Readable Copy

Accompanying Application Parts

8. ☐ Assignment Papers (cover sheet & documents)
9. ☒ 37 CFR 3.73(b) Statement (when there is an assignee)
10. ☐ English Translation Document (if applicable)
11. ☐ Information Disclosure Statement/PTO-1449 ☐ Copies of IDS Citations
12. ☐ Preliminary Amendment
13. ☒ Acknowledgment postcard
14. ☒ Certificate of Mailing
- ☐ First Class ☒ Express Mail (Specify Label No.): EL 349 964 140 US

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(Only for new nonprovisional applications under 37 CFR 1.53(b))

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Accompanying Application Parts (Continued)

15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☒ Small Entity Statement(s) - Specify Number of Statements Submitted: _____
17. ☒ Additional Enclosures (please identify below):

Power of Attorney

Fee Calculation and Transmittal

CLAIMS AS FILED

For	#Filed	#Allowed	#Extra	Rate	Fee
Total Claims	132	- 20 =	112	x \$9.00	\$1,008.00
Indep. Claims	7	- 3 =	4	x \$39.00	\$156.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
BASIC FEE					\$380.00
OTHER FEE (specify purpose) _____					\$0.00
TOTAL FILING FEE					\$1,544.00

- ☒ A check in the amount of \$1,544.00 to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge and credit Deposit Account No. 16-2460 as described below. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of _____ as filing fee.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing fees required under 37 C.F.R. 1.16 and 1.17.
- ☐ Charge the issue fee set in 37 C.F.R. 1.18 at the mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).

Dated: APRIL 15, 1999


Signature
Nisan A. Steinberg, Ph.D., Reg. No. 40,345
PRETTY, SCHROEDER & POPLAWSKI, P.C.
444 South Flower Street - 19th Floor
Los Angeles, CA 90071-2909
Tel.: 213/622-7700
Fax: 213/489-4210

CC:

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) AND 1.27 (d)) - NONPROFIT ORGANIZATION**

Docket No.
P07 41795

Serial No.
UNASSIGNED

Filing Date
HEREWITH

Patent No.
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Issue Date
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Applicant/ Patentee: Carol W. Readhead, Robert Winston, H. Phillip Koeffler, and Carsten Müller

Invention:

**TRANSFECTION, STORAGE AND TRANSFER OF MALE GERM CELLS
FOR GENERATION OF SELECTABLE TRANSGENIC STEM CELLS**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: CEDARS-SINAI MEDICAL CENTER

ADDRESS OF ORGANIZATION: 8700 Beverly Boulevard
Los Angeles, CA 90048-1869

TYPE OF NONPROFIT ORGANIZATION:

- ☐ University or other Institute of Higher Education
- ☒ Tax Exempt under Internal Revenue Service Code (26 U.S.C. 501(a) and 501(c)(3))
- ☐ Nonprofit Scientific or Educational under Statute of State of The United States of America
Name of State: _____ Citation of Statute: _____
- ☐ Would Qualify as Tax Exempt under Internal Revenue Service Code (26 U.S.C. 501(a) and 501(c)(3)) if Located in The United States of America
- ☐ Would Qualify as Nonprofit Scientific or Educational under Statute of State of The United States of America if Located in The United States of America
Name of State: _____ Citation of Statute: _____

I hereby declare that the above-identified nonprofit organization qualifies as a nonprofit organization as defined in 37 C.F.R. 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:

- ☒ the specification to be filed herewith.
- ☐ the application identified above.
- ☐ the patent identified above.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the above-identified nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ no such person, concern or organization exists.
☐ each such person, concern or organization is listed below.

FULL NAME	<u>Imperial College of Science, Technology and Medicine</u>		
ADDRESS	<u>Exhibition Road, South Kensington, London SW72AZ, United Kingdom</u>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input checked="" type="checkbox"/> Nonprofit Organization
FULL NAME	_____		
ADDRESS	_____		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization
FULL NAME	_____		
ADDRESS	_____		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization
FULL NAME	_____		
ADDRESS	_____		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization

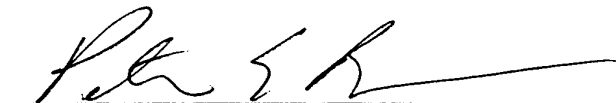
Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Peter Braveman
 TITLE IN ORGANIZATION: Senior Vice-President for Legal Affairs and General Counsel
 ADDRESS OF PERSON SIGNING: CEDARS -SINAI MEDICAL CENTER
8700 Beverly Boulevard
Los Angeles, CA 90048-1869

SIGNATURE:



DATE:

4/15/99

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)Applicant(s): **Carol W. Readhead et al.**

Docket No.

P07 41795

Serial No.

UNASSIGNED

Filing Date

HEREWITH

Examiner

UNASSIGNED

Group Art Unit

Invention:

Transfection, Storage and Transfer of Male Germ Cells for Generation of Selectable Transgenic Stem CellsI hereby certify that this **Power of Attorney***(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231

on **April 15, 1999***(Date)***John Trivino***(Typed or Printed Name of Person Mailing Correspondence)*

A handwritten signature of John Trivino in dark ink.

*(Signature of Person Mailing Correspondence)***EL 349 964 140 US***("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**